

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>TH</i>	<i>2091</i>	<i>8/17</i>
O.I.P.E. CLASSIFIER		<i>40018</i>	<i>8/19/69</i>
FORMALITY REVIEW			<i>9-12/</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 ..... Allowed      I ..... Interference  
 (Through numeral)... Canceled      A ..... Appeal  
 ..... Restricted      O ..... Objected

Claim	Final	Original	3	5	15	4	10-17-67	7-1-64	8-18-65	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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